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JC49 U.S. PTO

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Vidas, Arrett & Steinkraus Utility Patent Application Transmittal		Atty. Docket No	S63.2-10249
		First Inventor	
		Title: Medical Device Balloons with Improved Strength Properties and Processes for Producing Same	
		Express Mail Label No. EV 075164728US	
Application Elements		Address To:	Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Included 2. <input type="checkbox"/> Applicant claims small entity status 3. <input checked="" type="checkbox"/> Specification (including pg cover sheet, 9pg description, 3pg claims and 1pg abstract) 4. <input type="checkbox"/> Drawings 5. <input type="checkbox"/> Oath or Declaration a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 19 completed) i. <input type="checkbox"/> Deletion of Inventor(s) – signed statement attached deleting inventors named in the prior application 6. <input checked="" type="checkbox"/> Application Data Sheet 7. <input type="checkbox"/> Assignment Papers (cover sheet & documents and check) <input type="checkbox"/> Previously recorded on , Reel , Frames 8. <input type="checkbox"/> Power of Attorney <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement (when there is an assignee) 9. <input type="checkbox"/> English Translation Document 10. <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Copies of Citations (references) 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard 13. <input type="checkbox"/> Certified Copy of Priority Document 14. <input type="checkbox"/> Nonpublication Request 15. <input checked="" type="checkbox"/> Constructive Petition 16. <input type="checkbox"/> Limited Authorization 17. <input checked="" type="checkbox"/> VAS Utility Patent Application Transmittal 18. <input checked="" type="checkbox"/> Other Correspondence Address Form			
19. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part Of prior application no.			
Prior Application Information: Examiner Group Art Unit			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.			
20. TOTAL NUMBER OF PAGES 19			
21. CORRESPONDENCE ADDRESS  00490 <small>PATENT TRADEMARK OFFICE</small> INSERT CUSTOMER NUMBER LABEL ABOVE			
Name	Walter J. Steinkraus, Reg. No. 29,592		
Signature			
		Date 2/28/2002	

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Lixiao Wang et al.
Application No.:	(<i>Not yet assigned</i>)
Filed:	(<i>Concurrently herewith</i>)
For:	MEDICAL DEVICE BALLOONS WITH IMPROVED STRENGTH PROPERTIES AND PROCESSES FOR PRODUCING SAME
Examiner:	(<i>Not yet assigned</i>)
Group Art Unit:	(<i>Not yet assigned</i>)

Box Patent Application
Commissioner for Patents
Washington, D.C. 20231

Docket No.: S63.2-10249

CORRESPONDENCE ADDRESS OF LAW FIRM

Vidas, Arrett & Steinkraus P.A. would like to make the following correspondence address of record. Please send all correspondence for this application to the address as follows:

Customer Number 490
whose present address is
Vidas, Arrett & Steinkraus, P.A.
Suite 2000
6109 Blue Circle Drive
Minnetonka, MN 55343-9185

Respectfully submitted,

VIDAS, ARRETT & STEINKRAUS

By:



Walter J. Steinkraus
Registration No. 29,592

Suite 2000
6109 Blue Circle Drive
Minnetonka, MN 55343-9185
Phone: (952) 563-3000
Facsimile: (952) 563-3001